

Transaction Limit Enhancement Request Form

Full Name

Account Number / Wallet ID

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NIC

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JustPay Inward (Linked Bank Accounts for Top ups)

Bank	Bank Account/s linked	Required per day Limit (Rs.)																																								
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CEFT Outward (Other Bank Fund Transfer)

Required Per day limit (Rs.)

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Reason for enhancement request

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Mode of inflows to account :

- Sales collection Transfers from other banks Cash deposits

Recipients of outward remittances :

- Suppliers Banks Family Members Employees

Frequency of outward payments :

- Daily 5 or more times a week 2 or more times a week Once a week Once a month

By signing below I agree to bear any risk arising from enhancing the general transaction limits of my LB CIM digital savings account.

D	D	M	M	Y	Y	Y	Y												

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Applicant's Signature

Office Use Only

Customer Category

Staff EPF No.

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New Customer

Existing Customer

Existing Facilities with LBF

Regular savings A/C holder

Leasing and other loans

Gold Loan / Fixed Deposits

Supporting documents received from customer

JustPay Inward Limit

	Received	True copy seal
01. Bank statement / Bank passbook copy	<input type="checkbox"/>	<input type="checkbox"/>
02. Bank statement / Bank passbook copy	<input type="checkbox"/>	<input type="checkbox"/>
03. Bank statement / Bank passbook copy	<input type="checkbox"/>	<input type="checkbox"/>

CEFT outward limit

	Received	True copy seal
01. Bank statement / Bank passbook copy	<input type="checkbox"/>	<input type="checkbox"/>

Checked by :

Signature :

EPF :

Date :/...../.....